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441  
HUNTINGDONSHIRE COUNTY COUNCIL

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# **ANNUAL REPORT**

of the

County Medical Officer

upon the

**HEALTH AND SANITARY**

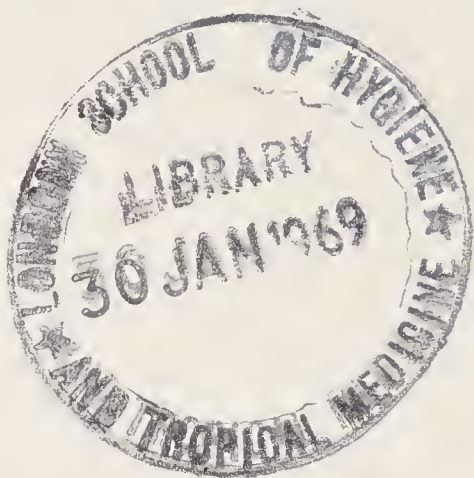
**CONDITION**

of the

County of Huntingdon

**FOR THE YEAR 1961**

170092





HUNTINGDONSHIRE COUNTY COUNCIL

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# **ANNUAL REPORT**

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**County Medical Officer**

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**County of Huntingdon**

**FOR THE YEAR 1961**

# HUNTINGDONSHIRE COUNTY COUNCIL

## Members of the Health Committee

*Chairman :*

COUNTY ALDERMAN LADY D. SHEPPERSON

*Vice-Chairman :*

COUNTY COUNCILLOR S. COX

*County Aldermen :*

A. W. Blake

C. H. Chandler

G. A. Earl

C. M. J. Coote

Lord Hemingford

*County Councillors :*

Mrs. D. I. Adkins

Mrs. W. A. Hunting

K. C. Archer

T. E. R. Parsons

W. B. Carter

Mrs. E. Pink

E. G. Childs

Mrs. W. M. Price

W. R. Chilman

E. A. M. Sack

Mrs. A. S. D. Evans

H. Wicks

*Co-opted Members :*

Mrs. B. R. Magee

Mrs. V. E. Compton

Mrs. V. J. Staffurth

*One Representative from :—*

*Executive Council—*Dr. A. E. Staffurth

*Hospital Management Committee—*Mrs. D. M. Perkins

*British Medical Association—*Dr. D. Connan

*College of Midwives—*Miss M. Lobban

*British Red Cross Society—*Mrs. Norman Boyes

*Women's Voluntary Services—*Mrs. K. W. Jeffreys

*County Blind Society—*Mrs. D. L. Pledger

## Wholetime Staff

*County Medical Officer of Health .*

D. S. Buchanan, M.B., B.S., B.Hy., D.P.H.

(Died 24th October, 1961)

*Acting County Medical Officer :*

Jean D. McKellar, M.B., B.S.

(from 25th October, 1961)

*Assistant County Medical Officers :*

(Child welfare, school medical services) and Medical Officers of Health to various districts

James Caldwell, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.

Philip V. Cant, M.B., Ch.B., D.P.H.

Leslie R. B. Parker, M.R.C.S., L.R.C.P., D.P.H., (commenced 10-7-1961)

*Chest Physicians (part-time) :*

C. E. P. Downes, M.R.C.P.

G. B. Royce, B.S., M.B., Ch.B.

*Senior Dental Officer :*

(Schools and maternity and child welfare services)

P. I. Christensen, L.D.S., B.D.S.

*Dental Officer :*

W. R. S. Robertson, L.D.S., R.C.S. (Eng.)

*Inspector under the Food and Drugs Act :*

R. E. Kilsby

*Ambulance Officer :*

A. Easton

*Tuberculosis Care and After-Care Health Visitor :*

Miss E. Griffiths

*Orthopaedic Physiotherapist :*

Miss S. A. Sherwood

*Domestic Help Organiser :*

Mrs. E. A. Flint

*Welfare Officer for the Care of the Unmarried Mother :*

Miss E. L. Rayner

*Mental Welfare Officers/District Welfare Officers :*

W. J. Bushell

R. F. Clarke

*Assistant Mental Welfare Officer :*

Mrs. J. Pontin (commenced 13-2-1961)

*Home Teacher and Visitor for Mental Defectives :*

Miss O. K. Ivimey (retired 8-7-1961)

*Superintendent of Health Visitors and District Nurse/Midwives :*

Miss L. E. Roberts

*Health Visitors :*

Miss I. L. Bays

Miss K. E. Bowers

Miss H. L. Cornwall  
(left 20-5-1961)

Miss O. Evans

Miss H. Hardin

Miss E. Pelbrough

Miss M. R. Scrivener

Mrs. E. A. Loweth  
(left 9-9-1961)

Mrs. M. B. Taylor

Miss J. Allen  
(commenced 23-10-1961).Mrs D. M. Fordham  
(commenced part-time duty  
18-9-1961)Mrs. P. D. McFarlane  
(commenced 18-12-1961)Miss J. E. K. Watkins  
(commenced 1-5-1961)*Chief Clerk :*

R. E. Killick

*To the Chairman and Members  
of the Huntingdonshire County Council.*

Mr. Chairman, My Lords, Ladies and Gentlemen,

I have the honour to submit the Annual Report on the Health of the County for the year ended 31st December, 1961.

In the preface to the Annual Report for 1960, I referred to the death of Dr. D. S. Buchanan in October, 1961, and paid tribute to his work as County Medical Officer. The greater part of the work outlined in this report was undertaken during his period of office.

The general health of the County remains at a high level. There have been no cases of poliomyelitis during the year.

The appointment of an additional Assistant County Medical Officer in July did much to relieve the medical staff which had been depleted owing to prolonged sick leave in the latter part of 1960 and the beginning of 1961, and also enabled a start to be made with routine B.C.G. Vaccination in the Autumn.

At the time of writing this report both new Poly Clinics at Huntingdon and Stanground are in full use, and the Junior Training Centre and Hostel are in course of construction at Huntingdon.

The severely subnormal child awaiting admission to hospital presents one of the most urgent health problems in the County. These grossly retarded children on the urgent waiting list are unsuitable for community care, and they create almost insoluble difficulties in their family background. During the year only one child in this category was admitted to hospital.

I would like to express my appreciation to the Chairman and Members of the Health Committee for their encouragement and support during my period of office as Deputy and subsequently as Acting County Medical Officer and to thank both professional and clerical staff for their excellent work throughout the year.

I have the honour to remain,

Your obedient Servant,

J. D. McKELLAR,

Acting County Medical Officer of Health.

County Health Department,  
County Buildings,  
Huntingdon.  
October, 1962.



## GENERAL INFORMATION

The area of the administrative County at the end of the year was 233,985 acres.

At the end of the year there were within the County two Non-County Boroughs — Huntingdon and Godmanchester, and St. Ives, three Urban Districts — Old Fletton, Ramsey and St. Neots and four Rural Districts — Huntingdon, St. Ives, St. Neots and Norman Cross.

The rateable value at the 1st April, 1961, was £978,798. The product of a penny rate for 1961-62 was £4,059.

## STATISTICAL INFORMATION

### POPULATION

There is no change in the number of Service establishments in Huntingdonshire, which are three Royal Air Force Stations at Brampton, Upwood and Wyton, and two U.S.A.A.F. Stations at Alconbury and Molesworth.

The population of Huntingdonshire continues to increase, the increase of 1,020 being less than in 1960 when it was 2,960. The greatest increase in population is in St. Ives Rural District, where the number was 1,030. There was a slight fall in population in Norman Cross Rural District.

The natural increase in population, that is the excess of live births over deaths, was 818 in 1961, compared with 700 in the previous year.

The statistics issued by the Registrar General for 1961 comprise figures relating to resident civilians and members of the armed forces stationed in the area. The population figures thus obtained are referred to as "home populations". The estimated home populations of the County Districts at the 30th June, 1961, were as follows :

TABLE 1.

Administrative County	.....	.....	.....	83,380
Urban Districts	.....	.....	.....	36,230
Huntingdon and Godmanchester M.B.	.....	.....	.....	9,000
St. Ives M.B.	.....	.....	.....	4,110
St. Neots	.....	.....	.....	5,720
Ramsey	.....	.....	.....	5,690
Old Fletton	.....	.....	.....	11,710
Rural Districts	.....	.....	.....	47,150
Huntingdon	.....	.....	.....	14,370
St. Ives	.....	.....	.....	16,370
St. Neots	.....	.....	.....	7,710
Norman Cross	.....	.....	.....	8,700

## BIRTHS

The total number of live births attributed to Huntingdonshire residents was 1,592, an increase of 87 on the figure of 1,505 for 1960.

The standardised birth rate for the County for the year 1961 was 20.6 compared with 17.4 for England and Wales as a whole.

The number of illegitimate births was 80 compared with 63 in 1960 and was 5 per cent of all live births, a figure which increases steadily.

## STILLBIRTHS AND DEATHS IN THE FIRST YEAR OF LIFE

Stillbirths numbered 24 compared with 33 in the previous year, which is equivalent to 14.8 per 1,000 live and still births. The comparative figure for England and Wales as a whole was 18.7.

The infant mortality rate was 20.1 per 1,000 total live births, a slight increase over the previous year when it was 19.9, but the present figure compares favourably with that for England and Wales, which is 21.4.

The perinatal mortality rate for Huntingdonshire, that is to say the number of stillbirths and deaths during the first week of life, was 27.8. This figure shows a marked fall from 1960, when it was 31.9, and compares favourably with the national figure of 32.2.

## DEATHS

The total number of deaths from all causes was 774, which is equivalent to a crude death rate of 9.3 per 1,000 population. The standardised figure is 10.1 and the figure for England and Wales as a whole is 12.0 per 1,000 population.

There was one maternal death in the County. This occurred in early pregnancy.

It is of interest to compare the causes of death in 1961 with those of ten years ago — coronary thrombosis is now the commonest cause of death, 17.4 per cent of the total deaths being caused by this disease and this figure has almost doubled since 1951, when it was 9.7 per cent.

In 1961 deaths from respiratory tuberculosis accounted for .26 per cent and in 1951 the corresponding figure was 2.0 per



cent. Accidents of all types, including those associated with motor vehicles, have risen from 3.82 per cent in 1951 to 6.3 per cent of the total deaths in 1961. Deaths from malignant disease of all types have risen from 14.4 per cent ten years ago to 17.4 per cent in 1961. The national increase in deaths due to carcinoma of the lung and bronchus is also noted in Huntingdonshire; the figures in 1951 and 1961 respectively were 1.35 per cent and 4.39 per cent of the total deaths.

TABLE 2

CAUSE OF DEATH	Per 1,000 Deaths	
	1951	1961
Coronary Thrombosis .. ..	97	174
Motor Accidents .. ..	19	23
Other Accidents .. ..	18	40
Malignant Disease .. ..	144	174
Tuberculosis .. ..	20	2.6

There is little doubt that preventive medicine has fresh fields to conquer. It may well be that the relation of stress to coronary disease and accidents is one that will be to the fore in the future.

The following table sets out the standardised birth rates and death rates of the Urban and Rural Districts compared with England and Wales for the past five years.

TABLE 3

	Birth Rate					Death Rate				
	1957	1958	1959	1960	1961	1957	1958	1959	1960	1961
Urban Districts	19.8	20.2	19.4	20.3	19.7	10.5	10.1	10.5	11.3	11.5
Rural Districts	20.5	19.3	19.7	19.3	21.2	9.8	9.7	9.4	9.9	10.1
County of Huntingdon	20.3	19.8	19.6	19.7	20.6	10.2	10.1	10.1	10.6	10.7
England and Wales	16.1	16.4	16.5	17.1	17.4	11.5	11.7	11.6	11.5	11.5

The following table is given at the request of the Ministry of Health and sets out certain vital statistics relating to mothers and infants.

TABLE 4

## Live Births

Number	..	..	..	..	.	..	..	..	..	1,592
Net Rate per 1,000 population					..	..	..	..	..	19.1

TABLE 5  
Huntingdonshire compared with England and Wales.

Year	Popula- tion (Mid-year estimate)	Live Births			Deaths			Infant Mortality			Neonatal Mortality			Stillbirths			Maternal Mortality		
		Hunts.		Eng- land & Wales	Hunts.		Eng- land & Wales	Hunts.		Eng- land & Wales	Hunts.		Eng- land & Wales	Hunts.		Eng- land & Wales	Hunts.		Eng- land & Wales
		No.	Rate per 1,000 Population	No.	Rate per 1,000 Population	No.	Rate per 1,000 Live Births	No.	Rate per 1,000 Live Births	No.	Rate per 1,000 Live Births	No.	Rate per 1,000 Live Births	No.	Rate per 1,000 Total Live & Still Births	No.	Rate per 1,000 Total Live & Still Births	No.	Rate per 1,000 Total Live & Still Births
1957	77,210	1423	20.3	16.1	774	10.2	11.5	19	13.4	23.1	11	7.7	16.5	27	18.6	22.5	1	0.69	0.47
1958	78,800	1432	19.8	16.4	758	10.1	11.7	24	16.8	22.5	18	12.6	16.2	30	20.5	21.6	—	—	0.43
1959	79,400	1439	19.6	16.5	766	10.1	11.6	32	22.2	22.0	21	14.6	15.8	32	21.8	20.7	—	—	0.38
1960	82,360	1505	19.7	17.1	805	10.6	11.5	36	19.9	21.7	21	13.9	15.6	33	21.4	19.7	—	—	0.39
1961	83,380	1592	20.6	17.4	774	10.1	12.0	32	20.1	21.4	23	14.4	15.5	24	14.8	18.7	1	0.62	0.33

Note: The live birth and death rates for Huntingdonshire have been adjusted for age and sex and are therefore comparable with those for England and Wales.

# VITAL STATISTICS FOR THE YEAR 1961

## Urban and Rural Districts

District	Area in acres	Persons per acre	Population	Live Births				Deaths				Deaths under 1 year of age		Death Rate from Respiratory Tuberculosis per 1,000 population	Death rate from all tubercular diseases per 1,000 population	
				No.	Net Rate	Standardising Factor	Standardised Birth Rate	No.	Net Rate	Standardising Factor	Standardised Death Rate	No.	Rate per 1,000 reg'd births			
URBAN																
Huntingdon and Godmanchester Borough	7058	1.28	9000	196	21.8	1.00	21.8	133	14.8	0.71	10.5	4	20.4	—	—	
St. Ives Borough	2326	1.77	4110	98	23.8	0.97	23.1	39	9.5	0.93	8.8	2	20.4	—	—	
St. Neots Urban	1390	4.12	5720	100	17.5	0.99	17.3	49	8.6	0.96	8.2	3	30.0	—	—	
Ramsey Urban	15980	0.36	5690	104	18.3	1.00	18.3	61	10.7	1.07	11.5	3	28.8	—	0.18	
Old Fletton Urban	3029	3.87	11710	223	19.0	0.99	18.9	89	7.6	1.28	9.7	4	17.9	—	0.09	
Total for Urban Districts	29783	1.22	36230	721	19.9	0.99	19.7	371	10.2	0.97	9.9	16	22.2	0.03	0.06	
RURAL—																
Huntingdon	69937	0.21	14370	291	20.3	1.32	26.7	96	6.7	1.42	9.5	9	30.9	0.07	0.07	
St. Ives	45911	0.36	16370	280	17.1	1.07	18.3	125	7.6	1.16	8.9	3	10.7	—	0.06	
St. Neots	52559	0.15	7710	145	18.8	1.13	21.3	87	11.3	0.91	10.3	—	—	—	—	
Norman Cross	35795	0.24	8700	155	17.8	1.06	18.9	95	10.9	1.21	13.2	4	25.8	—	—	
Totals for Rural Districts	204202	0.23	47150	871	18.5	1.15	21.2	403	8.5	1.17	10.0	16	18.4	0.02	0.04	
Administrative County	233985	0.36	83380	1592	19.1	1.08	20.6	774	9.3	1.09	10.1	32	20.1	0.02	0.05	
England and Wales							17.4				12.0		21.4			



TABLE SHOWING DEATHS FROM ALL CAUSES AND

CAUSE OF DEATH	CAUSE OF DEATH AT DIFFER. PERIODS OF LIFE						
	Under 1 year	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and under 75
1. Tuberculosis, Respiratory ..	—	—	—	—	—	1	—
2. Tuberculosis, Other ..	—	—	—	—	1	1	—
3. Syphilitic Disease ..	—	—	—	—	—	1	—
4. Diphtheria ..	—	—	—	—	—	—	—
5. Whooping Cough ..	—	—	—	—	—	—	—
6. Meningococcal Infections ..	—	—	—	—	—	—	—
7. Acute Poliomyelitis ..	—	—	—	—	—	—	—
8. Measles ..	—	—	—	—	—	—	—
9. Other Infective and Parasitic Diseases ..	—	—	—	—	—	—	—
10. Malignant Neoplasm, Stomach ..	—	—	—	—	1	4	8
11. Malignant Neoplasm, Lung, Bronchus ..	—	—	—	—	1	17	11
12. Malignant Neoplasm, Breast ..	—	—	—	—	—	3	2
13. Malignant Neoplasm, Uterus ..	—	—	—	—	—	1	1
14. Other Malignant & Lymphatic Neoplasms ..	—	—	—	—	2	18	17
15. Leukaemia, Aleukaemia ..	—	—	—	—	—	2	1
16. Diabetes ..	—	—	—	—	—	2	1
17. Vascular Lesions of Nervous System ..	—	—	—	—	1	15	25
18. Coronary Disease, Angina ..	—	—	—	—	2	30	43
19. Hypertension with Heart Disease ..	—	—	—	—	—	1	1
20. Other Heart Disease ..	—	—	—	—	2	8	14
21. Other Circulatory Disease ..	—	—	—	—	—	2	10
22. Influenza ..	—	1	1	—	1	—	3
23. Pneumonia ..	4	2	—	—	1	4	11
24. Bronchitis ..	—	—	—	—	—	8	7
25. Other Diseases of Respiratory System ..	—	—	—	—	1	3	2
26. Ulcer of Stomach and Duodenum ..	—	—	—	—	—	1	—
27. Gastritis, Enteritis and Diarrhoea ..	2	2	—	—	—	2	3
28. Nephritis and Nephrosis ..	—	—	—	—	—	3	2
29. Hyperplasia of Prostate ..	—	—	—	—	—	3	1
30. Pregnancy, Childbirth, Abortion ..	—	—	—	—	1	—	—
31. Congenital Malformations ..	5	—	—	—	—	—	1
32. Other Defined and Ill-defined Diseases ..	18	—	1	—	6	11	8
33. Motor Vehicle Accidents ..	—	1	—	5	6	2	3
34. All Other Accidents ..	3	6	—	3	1	3	2
35. Suicide ..	—	—	—	—	1	8	—
36. Homicide and Operations of War ..	—	—	—	—	—	—	—
TOTALS ALL CAUSES ..	32	12	2	8	28	154	177

## DISTRICTS IN THE COUNTY OF HUNTINGDON, 1961.

Totals	Urban Districts					Rural Districts				
	Huntingdon and Godmanchester Borough	St. Ives Borough	St. Neots U.D.	Ramsey U.D.	Old Fletton U.D.	Huntingdon R.D.	St. Ives R.D.	St. Neots R.D.	Norman Cross R.D.	
2	—	—	—	—	1	1	—	—	—	1
2	—	—	—	1	—	—	1	—	—	2
1	1	—	—	—	—	—	—	—	—	3
—	—	—	—	—	—	—	—	—	—	4
—	—	—	—	—	—	—	—	—	—	5
—	—	—	—	—	—	—	—	—	—	6
—	—	—	—	—	—	—	—	—	—	7
—	—	—	—	—	—	—	—	—	—	8
1	—	—	—	—	—	—	—	—	1	9
25	3	2	—	3	3	5	5	—	4	10
34	—	3	3	4	4	3	2	8	7	11
6	2	—	1	—	—	1	—	1	1	12
3	1	—	1	1	—	—	—	—	—	13
67	10	1	1	4	10	8	11	14	8	14
4	—	—	—	—	—	1	—	1	2	15
4	—	—	—	1	—	—	—	1	1	16
114	31	6	7	12	10	13	14	12	9	17
135	20	9	9	8	21	13	22	12	21	18
11	2	1	—	2	—	—	1	4	1	19
86	14	9	3	2	12	8	22	8	8	20
34	12	1	3	3	3	2	4	3	3	21
10	—	—	3	—	2	1	1	3	—	22
39	3	—	1	2	4	10	6	7	6	23
31	4	—	2	1	8	3	6	4	3	24
6	1	1	—	—	—	1	2	—	1	25
4	—	—	1	1	—	—	—	1	1	26
9	3	—	—	—	—	—	3	2	1	27
7	1	1	—	2	—	2	—	—	1	28
7	2	—	1	—	1	—	2	—	1	29
1	—	—	—	—	—	—	—	—	1	30
6	—	—	—	—	2	2	1	—	1	31
67	17	4	6	9	5	11	6	2	7	32
18	1	—	—	1	1	4	5	3	3	33
31	3	1	4	3	2	6	9	1	2	34
9	1	—	3	1	—	1	2	—	1	35
—	—	—	—	—	—	—	—	—	—	36
774	133	39	49	61	89	96	125	87	95	

## NATIONAL HEALTH SERVICE ACT, 1946.

### HEALTH CENTRES

#### (Section 21)

There are no Health Centres of the type envisaged in the National Health Service Act.

### CARE OF MOTHERS AND YOUNG CHILDREN

#### (Section 22)

##### **Ante-natal and post-natal care**

The arrangements for the care of expectant mothers remains the same as in previous years. Facilities are available at Huntingdon, Ramsey, St. Ives, St. Neots and Old Fletton, for general practitioner-obstetricians to hold ante-natal and post-natal sessions in the clinics. These facilities are made use of at three of the clinics.

A number of general practitioner-obstetricians hold special ante-natal sessions in their own premises. At a large number of these the local authority midwives are in attendance.

The total number of patients attending the local authority ante-natal clinics was 508, making 1,496 attendances. At the clinics where ante-natal sessions are held there are also relaxation classes and instruction in mothercraft. Both health visitors and midwives are present and instruction and discussions are aided by the use of filmstrips, flannelgraphs and practical demonstrations.



TABLE 8  
Ante-Natal and Post-Natal Clinics

	Number of clinics provided at end of year	Number of sessions held per month		Number of women in attendance		Total number of attendances during the year	
		Medical Officers' Sessions	Midwives' Sessions	Number of women who attended during the year	Number of New cases included in last column	Medical Officers' Sessions	Midwives' Sessions
Local Health Authority clinics :							
Ante-natal	5	7	4	508	357	1496	441
Post-natal	—	—	—	99	99	99	—
Clinics provided by Voluntary Organisations:							
Ante-natal	1	1	1	28	24	60	64
Post-natal	—	—	—	12	12	10	2

## Care of the Unmarried Mother

Arrangements for the care of unmarried mothers remain as for the previous year. The Welfare Officer for the care of the unmarried mother maintains close touch with the Health Visitor to ensure that all expectant mothers receive full ante-natal care. When it is necessary, arrangements are made for the expectant mother to be admitted to a suitable home.

The following is a record of admissions to Mother and Baby Homes during the year :—

Diocesan Home, Cambridge	.....	.....	2
Other Homes	.....	.....	1

## Nurseries and Child-Minders Regulation Act, 1948

One daily minder was registered in 1961 to receive 4 children. Three other applications were made for registration but the conditions did not satisfy the requirements of the Act and registration was not granted.

## Dental Care

The Principal Dental Officer reports as follows :—

The nurses at all the County maternity clinics have constantly advised expectant and nursing mothers during the year to have their teeth attended to if required. Very few mothers elected to attend at the local authority dental clinics, preferring to make their own arrangements for treatment.

Of the few who attended, most wished only to have the odd extractions of carious and painful teeth. It was exceptional to receive a patient who wished to have conservative treatment for her teeth.

Very few children under five years old were brought in. In most cases these were only for advice.

For the last five years the experience has been that there has been very little demand from expectant and nursing mothers for dental treatment provided by the local authority.

**TABLE 9**  
**Numbers provided with dental care :**

	Examined	Needing Treatment	Treated	Made Dentally fit
Expectant and Nursing Mothers	33	33	30	9
Children under five ..	33	23	23	12

### Ophthalmic Treatment

Children under the age of five who require ophthalmic treatment are seen at the ophthalmic clinics which are held in connection with the School Health Services.

There are still a number of parents who do not realise that the treatment for squints must commence at an early age for the most satisfactory results.

The following table summarises the ophthalmic work undertaken in respect of pre-school children :—

**TABLE 10**

		Huntingdon	Old Fletton	Ransey
Number of new cases	.....	34	—	1
Number of old cases	.....	45	—	1
Number of attendances	.....	79	—	2
Total number of cases in which spectacles were prescribed	.....	11	—	1

### Orthopaedic Treatment

Similar arrangements exist for orthopaedic treatment as for ophthalmic treatment, whereby the pre-school child attends the clinic held in connection with the School Health Service.

In addition, the physiotherapist visits the Nursery School at regular intervals to give treatment.

The following tables summarise the orthopaedic work undertaken in respect of the pre-school child.

TABLE 11

## Attendances at Surgeons' Clinics, 1961.

Clinic	Attendances			
	M. & C.W.	T.B.	P.H.	Total
Huntingdon	57	2	11	70
Peterborough	7		5	12
TOTAL ..	64	2	16	82

TABLE 12

## Attendances at Care and After-care Centres, 1961.

Clinic	Attendances			
	M. & C.W.	T.B.	P.H.	Total
Huntingdon	2	—	6	8
Old Fletton	—	—	—	—
Ramsey	—	—	—	—
St. Ives	1	—	—	1
St. Neots	—	—	—	—
TOTAL ..	3	—	6	9
Home Visits by Physio-therapist	116	—	245	
(Seen at Nursery School)	369	—	—	

M. & C.W.—Pre-school cases; T.B.—Tuberculosis cases; P.H.—Other Adults.

## Premature Infants

There was an increase in premature live births from 94 in 1960 to 111 in 1961. One of the reasons for the increase in the number of premature live births is the fact that many cases of severe toxæmia of pregnancy are now induced before term in order that a live baby is obtained. At one time these cases would have been allowed to go to full term with a higher proportion of still births.

Details of premature live and still births are set out below in Table 13.

Of the total number of 111 premature births 99 were alive at the end of 28 days. It is of interest to note that all the premature infants born and nursed at home survived 28 days.

There is full equipment for the care of premature babies and this is stored at strategic places in the County.

TABLE 13

Number of Premature Live Births notified (as  
adjusted by transferred notifications)

(a) In hospital	...	...	...	...	84
(b) At home	...	...	...	..	27
(c) In private nursing homes	...	...			—
				Total	111

Number of Premature Still-births notified (as  
adjusted by transferred notifications)

(a) In hospital	...	...	...	...	11
(b) At home	...	...	...	...	1
(c) In private nursing homes	...	...			—
				Total	12



TABLE 14

Weight at Birth	PREMATURE LIVE-BIRTHS										PREMATURE STILL-BIRTHS		
	Born in Hospital			Born at home and nursed entirely at home			Born at home transferred to hospital on or before 28th day			Born in hos-pital	Born at home	Born in nursing home	
	Total	Died within 24 hrs. of birth	Sur-vived 28 days	Total	Died within 24 hrs. of birth	Sur-vived 28 days	Total	Died within 24 hrs. of birth	Sur-vived 28 days				
3 lb. 4 oz. or less	11	5	5	—	—	—	2	2	—	5	—	—	
Over 3 lb. 4 oz up to and including 4 lb. 6 oz.	16	—	15	3	—	3	3	—	2	3	1	—	
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	15	—	13	2	—	2	1	—	1	1	—	—	
Over 4 lb. 15 oz. up to and in-cluding 5 lb. 8 oz	42	—	42	16	—	16	—	—	—	2	—	—	
TOTALS	84	5	75	21	—	21	6	2	3	11	1	—	

## Infant Welfare Centres

There were no major alterations in the arrangements for the infant welfare centres. There was a slight increase in the total number of attendances in 1961; the figure being 12,047, compared with 11,880 in 1960. The increase was in the 0-1 age group and there was a slight drop in the attendances of the 1-5 age group.

TABLE 15  
Attendances at Infant Welfare Centres

	First Attendances			Subsequent Attendances			Total Attendances
	0—1 year	1—2 years	2—5 years	0—1 year	1—2 years	2—5 years	
COUNTY CENTRES							
Brampton ..	26	1	3	106	53	43	232
Buckden ..	21	1	1	126	70	64	283
Elton .. ..	32	—	1	215	79	69	396
Fenstanton ..	20	—	—	111	60	87	278
Great Staughton	14	—	1	82	29	50	176
Huntingdon ..	154	5	17	1325	324	240	2065
Kimbolton ..	19	4	1	62	55	63	204
Ramsey .. ..	48	9	11	288	50	44	450
St. Ives .. ..	133	5	7	1328	230	254	1957
St. Neots ..	103	9	8	855	201	227	1403
Sawtry .. ..	9	3	4	54	46	99	215
Somersham ..	29	—	3	93	32	38	195
Warboys .. ..	36	—	2	145	64	72	322
Yaxley .. ..	22	—	—	146	50	2	220
VOLUNTARY CTR'S							
Old Fletton ..	165	1	1	1799	356	131	2453
Wyton Aerodrome	40	4	1	346	131	61	583
Upwood Aerodrome	49	3	9	412	96	46	615
Total Number of Attendances at all Centres	920	48	70	7493	1926	1590	12047



## Distribution of Welfare Foods

There was a further decrease in all foods issued under this Scheme.

The following table shows the receipts and issues of Welfare Foods during the year 1961.

TABLE 16

RECEIPTS				ISSUES			
N.D.M tins	C.L.O. bottles	A & D tabs. pkts.	O.J. bottles	N.D.M tins	C.L.O. bottles	A & D tabs. pkts.	O.J. bottles
9882	2340	1980	18036	9688	2638	2105	18709

The following statement gives the location and times of opening of the main centres of distribution as at 31st December, 1961:

**Huntingdon**      **No. 8 Hut, Castle Hill House Grounds.**

Monday 2—5 p.m.

Tuesday 2—4.30 p.m.

Thursday 9.30 a.m.—1 p.m.

Friday 9.30 a.m.—1 p.m., and 2—4.30 p.m.

Saturday 9.30 a.m.—12.30 p.m.

**St. Ives**      **20b, The Broadway.**

Monday 9.30 a.m.—1 p.m., and 2—4.30 p.m.

Wednesday 2—4.30 p.m.

Saturday 9.30 a.m.—12.30 p.m.

**Infant Welfare Centre, Station Approach.**

Friday 2—4.30 p.m.

**St. Neots**      **Health Clinic, Almond Road.**

Monday 2—4 p.m.

Thursday 2—4 p.m.

Saturday 10 a.m.—12 noon.

**Ramsey**      **Health Clinic, Westfield.**

Monday 9.30 a.m.—12.30 p.m.

Friday 2—4.30 p.m.

**Infant Welfare Centre.**

Wednesday 2—4.30 p.m.

**Old Fletton**      **Infant Welfare Centre, London Road.**

Tuesday 2—4.30 p.m.

Wednesday 2—4.30 p.m.

Friday 2—4.30 p.m.

## MIDWIFERY AND HOME NURSING (Sections 23 and 25)

### Staff

The establishment is 25 district nurse-midwives and 2 relief district nurse-midwives. At the beginning of 1961 there were 21 district nurse-midwives, 3 assistant nurse-midwives and 1 relief district nurse. During the course of the year Miss Heath and Miss Nichols retired, having been with the County for 28 and 26 years respectively. A further loss to the Midwifery and Nursing Services was the death of Mrs. Colbert, who had been district nurse-midwife in the Sawtry area since 1946. A resignation of another district nurse-midwife occurred following her marriage. In addition to these losses, one midwife was granted six months maternity leave.

It was only found possible to fill two of the vacancies, but four part-time nurses were recruited to assist with general nursing.

The Health Committee appointed a special sub-committee to investigate methods of recruitment of nurses and a meeting was held in September. The following recommendations were made :—

1. Employment of married nurses on a part-time basis.
2. A building programme for housing nurses.
3. Sponsoring nurses for district training, also health visiting training.
4. The provision of driving lessons if required.

It is hoped that these recommendations will encourage recruitment of nurses to this county but it must be remembered that the shortage of nurses is a general problem throughout the country.

### Training

The non-medical supervisor of midwives and four district nurse-midwives attended the compulsory post-graduate midwifery courses during the year.

### Pupil Midwife Training

Seven pupil midwives, who were taking Part II of their midwifery training at the Gables Maternity Hospital, Peterborough, were received into the Stanground area for three months domiciliary midwifery training.

### General Nursing Training

Student nurses from the Peterborough Memorial Hospital continue to visit the county, observing the services provided by the County Council as a Local Health Authority.

### Visitor

A senior nursing administrative officer from Portugal W.H.O. Fellowship spent five days in this County at the request of the Ministry of Health.

The following table shows the number of cases attended and the number of visits paid by the District Nurse-Midwives during the year.

TABLE 17

Number of domiciliary deliveries attended by Midwives during the year:—

(i) Doctor not booked—	
(a) Doctor present at time of delivery of child ..	—
(b) Doctor not present at time of delivery of child ..	3
(ii) Doctor booked—	
(a) Doctor present at time of delivery of child (either the booked Doctor or another) .. ..	59
(b) Doctor not present at time of delivery of child ..	482
TOTAL	544

Number of domiciliary cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives Act, 1951, by a Midwife—

(i) Where the medical practitioner had arranged to provide the patient with maternity medical services under the National Health Service .. .. .	119
(ii) Others .. .. .	—
TOTAL	119

Number of attendances by Midwives during the year to domiciliary cases:—  
9,392

Number of cases in which gas and air was administered by midwives in domiciliary practice during the year:—

(i) When doctor was not present at time of delivery of child	406
(ii) When doctor was present at time of delivery of child	53

Number of cases in which pethidine was administered by midwives in domiciliary practice during the year:—

(i) When doctor was not present at time of delivery of child	221
(ii) When doctor was present at time of delivery of child	58

# Home Nursing

## TABLE 18

The following table shows the number of cases attended and the number of visits paid by the District Nurses during the year.

(1)	(2)	Surgical	Infectious Diseases	Tuber- culosis	Maternal Compli- cations	Others	Total	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year (9)	Children included in (2)-(7) who were under 5 at the time of the first visit during the year (10)	Patients included in (2)-(7) who have had more than 24 visits during the year (11)
Number of cases attended by Home Nurses during the year	561	260	—	4	5	—	830	489	42	178
Number of visits paid by Home Nurses during the year	13832	5278	—	130	29	2381	21650	12270	191	11328

**Maternity Beds****TABLE 19**

Year	Total No. of Births	Births in Maternity Homes or Hospitals	Percentage of Institutional Births
1957	1450	760	52
1958	1462	787	54
1959	1471	809	55
1960	1538	965	63
1961	1616	1052	65

The figures for institutional confinements include American residents in Huntingdonshire who are confined in American Service Hospitals in this area.



## HEALTH VISITING

### (Section 24)

#### Staff

The appointment of health visitor is combined with that of school nurse in this County. The establishment is 17 health visitor-school nurses and 1 tuberculosis visitor.

At the end of 1961 there were :—

- 10 Health Visitor-School Nurses.
  - 1 Relief Health Visitor-School Nurse.
  - 1 Part-time Health Visitor-School Nurse.
  - 1 Tuberculosis Visitor.
  - 1 Full-time Clinic Nurse.
  - 2 Part-time Clinic Nurses.

During the year there were two resignations from the Service; one following marriage, the other health visitor-school nurse to return to general duties in another County.

It was possible to fill these two vacancies and a relief health visitor-school nurse was also appointed, but the health visitor-school nurses are still carrying a very heavy case load. However, with the additional help of the part-time health visitor-school nurse and the appointment of clinic nurses there was a slight improvement in the staffing position compared with that at the end of 1960, when there were 9 health visitor-school nurses and 1 tuberculosis visitor.

The use of clinic nurses to undertake some of the routine work is proving of value in relieving the trained health visitor for the more specialised work.

It is unlikely that all the vacant posts on the establishment can be filled until the full effect of The Health Visitor and Social Worker Training Act, 1962, comes into force.

## Training

3 Health visitor-school nurses attended post-graduate residential courses arranged by the Royal College of Nursing at Oxford and Southampton.

## Liaison

There is very good liaison between the general practitioners and the health visitors throughout the County. Owing to the shortage of health visitors it has not been possible to second a health visitor to a group of general practitioners, but in a number of areas the districts allotted to the health visitor approximates to the area of the general practitioner's practice and informal discussions between doctor and health visitor have proved most helpful.

TABLE 20

Number of children under 5 years of age visited during year ..	6151
Expectant mothers :	
First visits .. .. .	108
Total visits .. .. .	230
Children under 1 year of age:	
First visits .. .. .	1579
Total visits .. .. .	8952
Children age 1 and under 2 years :	
Total visits .. .. .	3832
Children age 2 but under 5 years :	
Total visits .. .. .	4558
Tuberculosis Households :	
Total visits .. .. .	19
Other cases :	
Total visits .. .. .	898
Total number of families or households visited by Health Visitors .. .. .	5008
Total number of attendances made by Health Visitors at clinic sessions during the year .. .. .	696



## VACCINATION AND IMMUNISATION

### (Section 26)

#### Smallpox Vaccination

Vaccination against smallpox is undertaken by all the general practitioners in the County. The number of primary vaccinations was 850 and 125 persons were re-vaccinated. The comparative figures for 1960 were 777 primary vaccinations and 56 re-vaccinations.

Details of the number of persons vaccinated during the year ended 31st December, 1961, are set out in the following table :—

TABLE 21

Age at Date of Vaccination	Under 1	1	2 - 4	5 - 14	15 or over	Total
Number Vaccinated	653	55	59	49	34	850
Number re-vaccinated	—	3	18	58	46	125

#### Diphtheria Immunisation

Immunisation against diphtheria is undertaken by both the local health authority medical officers and general practitioners. Routine visits are made to primary schools by the school medical officer and primary and booster injections are given as required. The year 1961 again saw an increase in the number of primary injections — 1,803 were given compared with 1,672 in 1960. The number of reinforcing injections fell slightly from 2,132 in 1960 to 2,021 in 1961.

Although the total number of children given primary and reinforcing injections have reached their highest level in this County since the inauguration of the National Health Service, there is still a large number of children who remain unprotected. Should an outbreak of virulent diphtheria occur these children would stand in great risk of contracting the disease.

In view of the fact that the number of cases of diphtheria has fallen to almost negligible proportions the seriousness of this disease is not appreciated by mothers of young children and continued and constant propaganda is required to encourage a higher level of protection in the community.

During the year the number of children immunised was as follows :—

TABLE 22

Children born in years :	1961	1960	1959	1958	1957	1952—1956	1947—1951	Total
Primary Immunisation	488	566	86	81	51	375	156	1803
Secondary or Reinforcing Injection	—	19	17	12	49	1225	699	2021

### Whooping Cough Immunisation

The arrangements for immunisation against whooping cough are similar to those for diphtheria. With the general use of combined antigens as routine procedure for infants, the number of children who are protected against whooping cough continues to increase.

Routine reinforcing injections after the age of five years are not considered necessary.

The number of children who completed a primary course in 1961 was 1,319 compared with 1,052 in 1960.

During the year the number of children immunised against whooping cough was as follows :—

TABLE 23

Children born in years	1961	1960	1959	1958	1957	1952-1956	1947-1951	Total
Primary course of pertussis vaccine (singly or in combination)	484	548	71	57	44	87	28	1319
Secondary or Reinforcing Injection	—	19	16	9	21	179	113	357

### Tetanus Immunisation

This year the report includes a table giving the number of children protected against tetanus. This is undertaken by general practitioners and local authority medical officers.

TABLE 24.

Children born in years :	1961	1960	1959	1958	1957	1952- 1956	1947- 1951	Total
Primary course of tetanus vaccine (singly or in combination)	483	550	87	80	59	149	73	1481
Secondary or Reinforcing Injection	—	19	18	13	36	240	157	483

### Vaccination against Poliomyelitis

Vaccination against poliomyelitis is carried out by the medical officers of the local health authority and a number of general practitioners also take part in the scheme. The greater part of the work is still undertaken at special clinic sessions held by the local health authority.

In April the Ministry announced that a fourth reinforcing injection should be offered to children between the ages of 5 and 12 years. During the period April to October 4,445 children received a fourth injection. Owing to a national shortage of vaccine the work was suspended in October.

TABLE 25

Class	Number vaccinated with two injections during 1961
Children born in the years 1943 to 1961 .. .. .	1,658
Young persons born in the years 1933 to 1942 .. .. .	574
Persons born before 1933 who had not passed their 40th birthday	1,531
Others .. .. .	111
TOTAL .. .. .	3,874

Number of applicants awaiting first injections at 31st December, 1961 .....	435
--	-----

Total number of persons who had received three injections at 31st December, 1961 .....	21,488
---	--------

Total number of children who had received four injections at 31st December, 1961 .....	4,445
---	-------



## AMBULANCE SERVICE

### (Section 27)

The following information has been supplied by the Chief Ambulance Officer.

TABLE 26

Service	Vehicles	Journeys	Patients	Miles
DIRECTLY PROVIDED :—				
Ambulances .. ..	6	4308	7925	105734
Sitting Cars .. ..	4	3003	6377	86593
TOTAL		7311	14302 (1139)	192327
AGENCY :—				
Soke of Peterborough .. ..	..	2699	4031 (231)	49123
SUPPLEMENTARY :—				
Hospital Car Service .. ..	..	951	2176 (—)	30967
TOTAL — ALL SERVICES		10961	20509 (1370)	272417

(Figures in brackets indicate Emergency calls).

The total shows an increase of 379 journeys, 3,411 more patients and an increased mileage of 37,793 over the previous year.

The additional call on the Service applies equally to the directly provided service at Huntingdon and also to the Peterborough County Council Agency Service, the figures would seem a reflection of the increasing call on the Service which is general and does not refer to any specific type of patient or hospital area.

### Establishment

During the year one driver, whose service had been extended, finally retired as a driver and was re-appointed to do general duty at the Station.

Due to difficulties in recruiting firemen the question of the Establishment of drivers has been considered and it was agreed that Firemen/Ambulance drivers be replaced by ambulance drivers. Accordingly, the vacancies in the Fire Establishment that then existed were filled by ambulance drivers and, as further vacancies

arise this policy will continue until the ultimate Ambulance Establishment of 18 drivers is reached (at the time of this Report 12 drivers have been appointed).

As a result of these changes it is necessary to introduce a system of shift working for the drivers and in consultation with the men and their Union it is hoped that a satisfactory system will be effective early in the new year.

The principle of having one ambulance always manned for emergency work is maintained and, to achieve this, telephones have, or will be, installed at drivers' homes and a system of having drivers on stand-by duty has been agreed.

The new telephone arrangements, together with the Radio Control of vehicles, which still gives efficient service, provides a service that would be difficult to improve in the circumstances within the County.

## **Vehicles**

A further B.M.C. diesel vehicle (595 BEW) was put into service and NEW 666 (Bedford), which it replaced, was transferred to the Education Department.

## **Workshop**

During the year the Assistant Mechanic resigned to take better paid employment and a replacement was appointed in October.

The workshop, which is shared jointly with the Fire Service, carried out 250 repairs and 56 full routine maintenance inspections. The importance of this section can be appreciated when it is realised that each of the vehicles averages nearly 20,000 miles per year.

## **Training**

Drivers, on appointment, spend the first three weeks at the Station learning Control Room — radio and telephone arrangements, handling ambulance equipment and topography.

First Aid Courses have been conducted under our own scheme and also by making use of the facilities offered by the British Red Cross and Civil Defence Corps.



## PREVENTION OF ILLNESS, CARE AND AFTER-CARE (Section 28)

### Tuberculosis

Notifications of respiratory tuberculosis continue to decrease. 18 cases were notified during the year, compared with 24 in the previous year. 6 cases of non-respiratory tuberculosis were notified; the same number as in 1960.

The following Table sets out the number of notifications received during the year, the number on the Register at the end of the year and also gives details of the work carried out during the year.

### TABLE 27

#### Notifications received during 1961

Respiratory .. .. .	18
Other cases .. .. .	6

#### Number on Register on 31st December, 1961

Respiratory				Other Forms			
Male	Female	Children	Total	Male	Female	Children	Total
157	112	22	291	22	24	7	53

#### Home Visits

The Tuberculosis Health Visitor paid 750 Home Visits to tuberculosis cases during the year.

No. of New Contacts examined				Huntingdon		Peterborough	
				M.	F.	M.	F.
Adults .. .. .				27	39	3	4
Children .. .. .				54	40	2	2
Totals				81	79	5	6

#### B.C.G. Vaccination

Contact Scheme				Huntingdon		Peterborough	
(i) No. skin tested .. ..				154		52	
(ii) No. found positive .. ..				30		7	
(iii) No. found negative .. ..				124		45	
(iv) No. vaccinated .. ..				53		22	

#### Rehabilitation

No. of persons undergoing re-		M.	F.	M.	F.
habilitation at end of year ..		1	—	—	—

#### Total No. of Tuberculosis cases at end of year

Working:	Full-time ..	64	52	65	19
	Part-time ..	—	1	1	—
Not working:	Fit for work ..	1	—	—	—
	Unfit for work ..	16	10	46	28

## Routine B.C.G. Vaccination of children of 13 years and over

In November it was found possible to commence the routine skin testing and B.C.G. vaccination of those who were found to be negative. The scheme was started at Longsands Secondary Modern School, St. Neots.

The following table gives the number of school children skin tested and vaccinated during the year.

TABLE 28

(i) No. skin tested	.....	.....	255
(ii) No. found positive	.....	.....	35
(iii) No. found negative		.....	213
(iv) No. vaccinated	.....	.....	212

## Mass Radiography

The Mass Radiography Unit of the East Anglian Regional Hospital Board visited this County on a number of occasions during the year and the following information has been supplied by the Medical Director of the Unit.

TABLE 29

Public Surveys	No. of attendances by Hunts. residents		
	Male	Female	Total
Old Fletton .. .. .	916	376	1292
Ramsey .. .. .	1120	1264	2384
St. Ives .. .. .	856	762	1618
St. Neots .. .. .	1016	890	1906
<b>Visits to Firms</b>			
Keith Wright (Milk Distribution) Ltd., Fenstanton .. .. .	45	15	60
London Brick Co. Ltd., Fletton	503	14	517
	<hr/> 4456	<hr/> 3321	<hr/> 7777

## Other Forms of Illness.

Loan of Nursing Equipment and Appliances. — The arrangements for the issue of equipment to patients nursed at home continued as in previous years. A small supply is maintained in the Health Department supplemented by 13 Red Cross Loan Depots situated at various points in the County.

## Venereal Diseases.

21 cases of venereal diseases, including 3 cases of syphilis, were dealt with for the first time in 1961, compared with 23 in 1960.

2 contacts were referred to the Health Department and in each case a follow-up visit was made by a Medical Officer.

## Abstract relating to Huntingdonshire patients treated at the Venereal Diseases Treatment Centres.

TABLE 30

	CAMBRIDGE		PETERBOROUGH	
	1961	1960	1961	1960
Number of persons dealt with for the first time and found to be suffering from :—				
Syphilis .. ..	1	—	2	—
Gonorrhoea .. ..	14	18	4	5
Conditions other than Venereal ..	47	25	12	21
TOTAL ..	62	44	18	26

## Phenykletonuria

Routine testing of urine of all infants at the age of 6 weeks for phenylpyric acid is undertaken by health visitors.

## Chiropody

At present no direct Chiropody Service operates in the County. The Cambridgeshire, Huntingdonshire and Isle of Ely Community Council provides a chiropody service for the elderly through the voluntary Old People's Clubs. The County Council pay a subsidy to the Community Council of 2/6d. for each person treated at the Club and additional payment is made for domiciliary treatment.

The demand for chiropody treatment increases and the excellent work undertaken by the Community Council is very much appreciated..

In order to fulfil their responsibilities under the National Health Service Act (Section 28) it is anticipated that the Health Committee will give consideration to providing a direct service in the near future.

## HEALTH EDUCATION

All members of the professional staff take part in health education. Perhaps the group which is most receptive is the school child and the assistant county medical officers, who are also school medical officers, use every available opportunity at school medical inspections to teach the fundamental health rules. No formal health education lectures are given at the schools.

The second group of persons who are ready to receive advice is the young married mother. The health visitors give advice to individual mothers in their homes and general talks on all subjects are given at the clinics. These talks are supplemented by the use of filmstrips, posters and leaflets.

It is hoped to be able to appoint a Deputy Superintendent Nursing Officer with special experience in health education who will be responsible for co-ordinating this work.

## DOMESTIC HELP SERVICE

### (Section 29)

There were no alterations in the arrangements for the administration of the Domestic Health Service. There is little doubt that in the future the calls on this Service will increase.

The three main factors which will be responsible for this increase are :—

1. An ageing community and an increase in the number of old people who will be cared for in their homes.
2. The community care of the mentally sick.
3. Early discharges from hospital for both maternity and general cases.

The number of cases where help was provided during the year was 207 compared with 175 in 1960.

The following table shows the number of cases where domestic help was provided during 1961 :—

TABLE 31

Maternity (including expectant mothers)	.....	30
Tuberculosis	.....	—
Chronic Sick (including aged and infirm)	.....	162
Others	.....	15

At the end of the year 54 part-time domestic helps were employed.



## MENTAL HEALTH

### (Section 51)

Although the Mental Health Act came into operation in November, 1960, it will be a considerable time before the full effect of the Act is felt.

The building programme of Training Centres and Hostels, details of which were given in last year's Annual Report, have to be completed before the local health authority can fulfil all their new responsibilities for the community care of the mentally ill.

At the time of writing this report the Junior Training Centre and Hostel at Huntingdon are in course of construction.

The increased work of the two Mental Welfare Officers (who are also District Welfare Officers) is an indication of the increasing call for more community care for the mentally ill. During the year an Assistant Mental Welfare Officer was appointed who undertook general social duties.

The retirement of Miss O. K. Ivimey, who had been the Home Teacher for the Mentally Subnormals for 25 years, has deprived the Health Service of one who had the welfare of the subnormal at heart, not only when on duty but at all times.

### Training

The Assistant Mental Welfare Officer attended a day release course for Mental Health Social Workers at Cambridge. This course extended over the academic year.

### Co-operation

Liaison with the staff of Fulbourn and Raunceby Hospitals remains at a high level. Meetings were held between the Psychiatrists at Fulbourn and the County Medical Officers of their catchment area. These meetings have proved most helpful. Regular meetings are also held at Fulbourn at which the Mental Welfare Officers are present.

With the advent of the "informal" admission of patients to hospital the role of the Mental Welfare Officer is changing. Today they are in a much better position to establish a satisfactory relationship with a patient whilst in hospital in preparation for the subsequent after-care.

The number of visits made by Mental Welfare Officers to mentally ill patients during 1961 was 1,459. The number of patients visited was 588.

## Hospital Admissions

The greatest difficulty has been experienced in obtaining vacancies in hospitals for the severely subnormal child. During 1961 only one child in this category was admitted to hospital. These severely handicapped children are the cause of great hardship and distress to their parents. The constant care and continued vigilance which they entail is such that the other members of the family may not get the attention and affection that one would expect in a normal household, thus creating further problems.

It has been somewhat easier to obtain places for the adolescent subnormal and during the year 3 cases in this category were admitted to hospital.

## Home Teaching

18 children were receiving home teaching at the end of the year and a total of 455 visits were made by the Home Teacher.

Supervisory visits to 122 mentally and severely subnormal patients totalled 479.

The following table gives the number of patients admitted to hospitals at which the Mental Welfare Officer was in attendance.

TABLE 32

	Male	Female	Total
Informal	32	53	85
Section 25	—	2	2
Section 26	—	—	—
Section 29	12	19	31
	44	74	118

The following table sets out the number of patients referred to the Local Health Authority during the year 1961 and the source of information.

TABLE 33

Referred by	Mentally ill	Subnormal & Severely Subnormal	Total
General practitioners .. ..	54	—	54
Hospitals, on discharge from in-patient treatment ..	76	1	77
Hospitals, after or during out-patient or day treatment ..	62	—	62
Local education authorities ..	—	14	14
Police and courts .. ..	16	—	16
Other sources .. .. .	40	7	47

The following table shows the number of subnormal and severely subnormal patients on the waiting list for admission to hospital, temporary admissions for residential care and the number of cases under Guardianship.

TABLE 34

	Subnormal	Severely Subnormal	Total
Number of patients on waiting list for admission to hospital at 31.12.61 :—			
(a) In urgent need of hospital care .. . . .	1	5	6
(b) Not in urgent need of hospital care .. . . .	2	7	9
Number of admissions for temporary residential care during 1961 (e.g. to relieve the family) .. . . .	—	1	1
Number under Guardianship at 31.12.61 .. . . .	—	3	3

# NATIONAL ASSISTANCE ACT, 1948

## Incidence of Blindness

There were 159 registered blind persons (79 male and 80 female) in the County on the 31st December, 1961, the same figure as at the end of the previous year. During 1961 the number of cases certified blind on Form B.D.8. was 13 (4 male and 9 female). There were 4 inward transfers to the County during the twelve months.

The number of deaths of blind persons recorded during the year was 14 (7 male and 7 female), whilst 1 female blind person left the County and 1 male and 1 female were decertified during the same period.

The following table shows the ages of blind persons on the register at the 31st December, 1961. (Numbers on register at 31st December, 1960, are shown in brackets).

TABLE 35

0—	1—	2—	3—	4—	5—10	11—15	16—20	21—29	30—39	40—49	50—59	60—64	65—69	70 and over	Total
—	—	—	—	—	—	2	—	6	5	9	9	13	12	103	159
(—)	(—)	(—)	(—)	(—)	(—)	(2)	(1)	(5)	(5)	(9)	(9)	(12)	(12)	(104)	(159)

The number of cases in the County certified to be partially-sighted during the year was 2. The number of partially-sighted persons on the register at the end of the year was 42 (18 male and 24 female) compared with 43 (18 male and 25 female) at the end of 1960. There were three deaths during the year.

The age distribution of the partially-sighted persons is shown in the following table.

TABLE 36

0—1	2—4	5—15	16—20	21—49	50—64	65 & over	Total
—	—	7	1	9	4	21	42

In addition to those already registered as Blind or Partially-Sighted, in some 23 cases contact was being maintained in case they should subsequently become eligible for certification under the Act.



The following table shows the follow-up of Registered Blind and Partially-Sighted Persons.

TABLE 37

(i) Number of cases registered during the year in respect of which para 7 (c) of Form B.D.8 recommends :—	CAUSE OF DISABILITY							
	Cataract		Glaucoma		Retrolental Fibroplasia		Others	
	Blind	P/S	Blind	P/S	Blind	P/S	Blind	P/S
(a) No Treatment	4	2	—	—	—	—	7	—
(b) Treatment (medical surgical or optical)	—	—	1	—	—	—	1	—
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	—	—	1	—	—	—	1	—

TABLE 38

### Employment of Blind Persons

- (i) Homeworkers
  - 2 Basket Makers
  - 1 Piano Tuner and Musician
  - 1 Stool Seater and Centre Cane Worker
  - 1 Poultry and Pig Farmer
- (ii) Workshop Employees
  - 2 Basket Makers at Norwich Institution for the Blind
- (iii) Other Employment
  - 2 Labourers
  - 1 Physiotherapist
  - 1 Factory operative
  - 1 Housekeeper
  - 1 Groundsman
  - 1 Electrician's Fitter
  - 1 Assembler

At the end of the year 15 Blind persons were usefully employed.

### Home Teaching Service

Total number of visits made to Blind and Partially Sighted Persons .. .. .	447
Number of other visits made in connection with blind welfare .. .. .	44
Number of lessons given .. .. .	15



## INFECTIOUS DISEASES

The total number of infectious diseases notified was 1,973, a marked increase from the previous year, when the corresponding figure was 534. An outbreak of measles accounted for 1,797 cases of the total number of 1,973.

### **Measles**

Measles was prevalent throughout the County but was most marked in St. Ives Rural area, where there were 477 notified cases. Huntingdon and Godmanchester Municipal Borough followed with 306 cases. A total of 1,797 cases were notified. It is likely that many more cases occurred but were not seen by a doctor and therefore were not notified.

### **Whooping Cough**

64 cases were notified, the same number as in the previous year. Most of the cases were of a mild nature.

### **Diphtheria**

No case was notified in the County during the year.

### **Scarlet Fever**

A total of 10 cases were notified.

### **Dysentery**

Sporadic cases occurred in the County, a total of 10 cases being notified.

### **Poliomyelitis**

No case of poliomyelitis was notified in the County.

### **Food Poisoning**

A total of 34 cases were notified during the year ; 27 occurred in St. Neots Rural District. This outbreak of food poisoning was confined to a residential school. Investigation revealed that it was caused by staphylococcal contamination of cold meat.

TABLE 39

**INFECTIOUS DISEASES NOTIFIED IN HUNTINGDON COUNTY**  
for the year ended 31st December, 1961.

44

District	Smallpox	Cerebro-Spinal Fever	Whooping Cough	Diphtheria	Erysipelas	Scarlet Fever	Typhoid and Paratyphoid	Puerperal Pyrexia	Encephalitis Lethargica	Ophthalmia Necnatorum	Pneumonia	Measles	Acute Poliomyelitis	Meningococcal Infection	Food Poisoning	Dysentery	Jaundice	Malaria	Leptospirosis	Total
<b>URBAN :</b>																				
Huntingdon & Godmanchester	—	—	2	—	2	—	—	3	—	—	20	306	—	—	1	1	1	—	1	337
Old Fletton	—	—	—	—	—	1	—	—	—	—	1	351	—	1	—	2	—	—	—	356
Ramsey	—	—	12	—	—	—	—	—	—	—	2	31	—	—	1	—	—	—	—	46
St. Neots	—	—	14	—	—	4	—	1	—	—	4	81	—	—	—	1	—	—	—	105
St. Ives	—	—	—	—	—	—	—	1	—	—	—	233	—	—	—	—	—	—	—	234
<b>RURAL :</b>																				
Huntingdon	—	—	3	—	1	—	—	1	—	—	2	169	—	—	4	1	1	1	—	182
Norman Cross	—	—	—	—	—	1	—	—	—	—	3	99	—	—	1	3	—	—	—	107
St. Ives	—	—	7	—	1	3	—	—	—	—	8	477	—	—	—	1	—	—	—	497
St. Neots	—	—	26	—	—	1	—	1	—	—	2	50	—	—	27	1	1	—	—	109
<b>TOTAL</b>	—	—	64	—	4	10	—	7	—	—	42	1,797	—	1	34	10	3	—	1	1,973

## HOUSING

The figures given in the Table below have been obtained from the District Medical Officers of Health and show both the number of new houses erected and also the number of new dwellings provided by adaptation during 1961.

TABLE 40

Sanitary District	New Houses by		By Adaptation	
	Local Authority	Private Enterprise	Local Authority	Private Enterprise
<b>URBAN DISTRICTS :—</b>				
Huntingdon Borough )	9	13	—	—
Godmanchester Borough)	4	2	—	—
up to 31.3.61				
Huntingdon and Godmanchester Borough (from 1.4.61)	168	72	—	—
St. Ives Borough ..	—	97	—	—
Old Fletton .. ..	—	63	—	—
Ramsey .. ..	4	28	—	—
St. Neots .. ..	39	23	—	—
<b>RURAL DISTRICTS :—</b>				
Huntingdon .. ..	17	22	—	—
Norman Cross .. ..	46	72	—	—
St. Ives .. ..	26	43	—	—
St. Neots .. ..	2	25	—	2
<b>TOTALS .. ..</b>	<b>315</b>	<b>460</b>	<b>—</b>	<b>2</b>

## THE COMPOSITION AND QUALITY OF FOOD & DRUGS

I am indebted to the Chief Inspector of Weights and Measures for the following report which gives details of the work performed by his Department under the Food and Drugs Act, 1955, and its ancillary legislation for the year ended 31st December, 1961.

The County Council as the Food and Drugs Authority for the whole County, carry out the provisions of the Food and Drugs Act, 1955, and the various Orders and Regulations associated therewith relating to the composition, description and labelling of food and drugs. These duties are carried out by the Weights and Measures Department on behalf of the Health Department.

In this report the figures in parenthesis are the corresponding figures for 1960.

During the year the total number of samples taken was 715 (526). These samples were taken all over the County and much thought is given to seeing that a wide range of samples is obtained and unnecessary duplication avoided.

During 1961, The Milk (Special Designation) Regulations, 1960, came into operation. The effect of these Regulations is to transfer a wide range of duties in connection with the storage, handling and distribution of milk from the local and district councils to the County Council. This part of the work will be dealt with in a separate section of this report.

## A. Samples taken for Composition and Quality.

1. Details of samples taken for examination of their composition and quality are given in the following table :—

Article	Genuine:	Not Genuine:	Total:
Milk: .. .. .	149	64	213
Milk, Channel Island: .. ..	52	1	53
Beef Sausage: .. .. .	1	—	1
Beverages: .. .. .	2	—	2
Butter: .. .. .	5	—	5
Bread: .. .. .	3	2	5
Chocolate: .. .. .	1	—	1
Coffee: .. .. .	2	1	3
Cooking Fat: .. .. .	3	—	3
Cream: .. .. .	1	—	1
Flour: .. .. .	3	—	3
Flour Confectionery: .. ..	1	2	3
Ice Cream: .. .. .	2	—	2
Margarine: .. .. .	2	—	2
Meat Products: .. .. .	11	2	13
Pepper: .. .. .	4	—	4
Patent Medicines: .. .. .	7	—	7
Preserves: .. .. .	4	—	4
Pork Sausage: .. .. .	16	1	17
Potato Crisps: .. .. .	1	1	2
Spirits: .. .. .	1	—	1
Sweets: .. .. .	—	2	2
Soup: .. .. .	1	—	1
Miscellaneous Samples: .. ..	10	—	10
<b>Totals:</b>	<b>282</b>	<b>76</b>	<b>358 (400)</b>



## 2. Milk :

Milk is still the most frequently sampled food. Once again I must emphasise the fact that 64 samples were incorrect out of a total of 213 is a completely misleading picture of the position. Your sampling officers, of course, take many more samples where milk is suspected of being of low standard and the figures are "loaded". Most of the samples complained of were taken from churns supplied by farmers to bulk dairies. Such milk would, in the course of processing, be added to many hundreds of gallons of other milk so that the milk finally received by the purchaser would be of a satisfactory standard. Of the samples purchased from dairymen selling to the public, only two were not genuine, and here the deficiencies were of a minor nature.

Most of the trouble with milk today comes from dirty milk bottles. It is, of course, the duty of all dairies to wash and thoroughly clean their bottles. To this end they carefully sort and inspect returned bottles, each bottle is put through a complicated and automatic process of washing with detergents and rinsing and the bottles are inspected again after filling. When it is realised that the production of milk at one average sized dairy is over a million bottles a week, it will be understood how even with all these precautions, occasionally a bottle which has been contaminated slips through.

With a view to avoiding this trouble, a campaign of education has been started in an attempt to stop that small percentage of the public who misuse milk bottles. The local Press have given valuable publicity and during the year an "East Anglia Clean Milk Bottle Campaign" has been held. If everyone would use milk bottles only for milk and would make sure that they were rinsed and returned daily, difficulties with dirty bottles would disappear.

## 3. Sausages :

Systematic sampling of sausages has continued during the year. Of 17 samples procured only one was found to contain less meat than should be present. In this case the butcher increased the amount of meat in his "mix".

## 4. Bread :

Samples of bread were again taken in conjunction with an investigation into the difference, if any, in the moisture content of "plant" bread and bread baked by the small baker. As in a



previous test it has been found that the moisture content is not significantly different. A government committee has recently refused to establish maximum moisture contents for bread and on the evidence available it would seem that there is no great difference between the two types of baking.

A loaf of sliced bread was found by the purchaser to contain a large piece of the saw blade which was used by the bakery to slice the bread. This was a serious and dangerous matter but unfortunately the purchaser of the bread did not wish to give evidence in court and proceedings could not therefore be taken.

## **5. Meat Products :**

A sample of minced beef which, on being cooked, was alleged to have given off an unpleasant smell, was brought to the office. A similar sample was obtained and immediately submitted for analysis. It was found to be in a state of incipient putrefaction. These incidents occurred during hot weather and it is generally accepted that minced beef is a most difficult product which will go out of condition in a matter of hours in hot weather. The process of mincing the meat generates heat and destroys the fibre ; all this leads to decay which is both natural and inevitable. No further action was taken.

A sample of pork luncheon meat was found to contain a metal staple. Proceedings were not instituted in this instance as the fault lay in the packing plant in Holland. However, the packers have now altered their methods to prevent any repetition.

## **6. Sweets :**

"Butter sweets" are sweets which contain at least 4% of butter ; sweets which contain less than 4% of butter have to be sold as "Butter Flavoured Sweets". During the year objection was taken to a sample "Butter Flavoured Creams"; the word "flavoured" was in much smaller print than "butter" and "creams". As a result, a purchaser standing some distance from the bottle in the shop read the label as "Butter Creams" and not "Butter Flavoured Creams". The matter has been taken up with the manufacturer who has agreed to amend his label.

## **7. Flour Confectionery:**

A date and walnut cake sold to a purchaser was found to contain a nail. After enquiries legal proceedings were instituted against the baker of the cake ; a conviction and costs were ob-

tained and the details shown in the last paragraph to this report.

A complainant brought to the office a cream bun which was said to contain suspicious black specks. On analysis the black specks were found to be rodent droppings. Normally the Council would institute proceedings against the vendor of such a cake. However, in this particular instance, the vendor was about to give up his business due to ill health and old age. In view of this and his excellent past record it was felt that the public could be protected without taking a sick man before the Court.

## B. Milk Sampling for Bacteriological & Biological sampling.

As previously mentioned the Milk (Special Designation) Regulations, 1960, came into force during the year. Essentially the Regulations require the County Council, as the Food and Drugs authority, to licence and inspect the premises of all processors and retail dealers in milk. Samples of milk are also obtained to see that it has been properly pasteurised ; to see that it is free from tuberculosis and other milk borne diseases and to see that it has adequate keeping qualities.

The statistics relating to this sampling are given in the table below. As will be seen the number of samples taken has nearly trebled.

Type :					Not		Total
					Satisfactory	Satisfactory	
Pasteurised :	..	..	..	..	166	3	169
Pasteurised T.T.:	..	..	..	..	150	5	155
Sterilised:	..	..	..	..	27	—	27
T.T. Raw :	..	..	..	..	3	3	6
					346	11	357 (126)

In general the position is satisfactory. Only in a few cases was the handling and storage of milk not what it should be. Milk should be stored in such a way that it is kept cool and protected against contamination by dirt, dust and animals. It is not the intention or the duty of an Inspector to compel people to provide expensive dairies. It is their duty to see that milk is treated with care. Sane storage of milk in cool places will prevent its keeping qualities being damaged. In the same way it is quite wrong to store milk in dusty barns. On one occasion some crates of milk were found left on the highway. They would probably have

been soiled by a passing dog but for the intervention of the Inspector.

Those samples that were found to have inferior keeping qualities were usually milk which had been kept too long by the retailer. It is essential that retailers take care to see that milk is sold in the order in which it is received. Of those samples which failed the phosphatase test (a test to ensure that milk is properly pasteurised) two were due to the uncertain functioning of a new pasteurising plant. Others were due to a failure to switch on the safeguards which automatically divert milk not pasteurised. In these cases subsequent tests showed that the milk was free from tuberculosis.

During the year several instances have occurred of brucella abortus in raw milk. This is quite prevalent in English dairy herds and difficult to eradicate. A recent report suggests that perhaps 15% of the cattle in the country are affected by the disease. Heat treatment of the milk is a certain cure.

### **C. Misleading Advertisements.**

Watch is kept on advertisements appearing in newspapers and magazines, on the cinema screen and on television. Many advertisements, if examined word for word, are meaningless. Some make claims for products which cannot be proved or disproved clinically. Some are merely designed to keep the name of the product before the public and others rely frankly on "snob" appeal.

Only in those rare cases where an advertisement is a down-right lie, or when it fails to give information required by law, or when it is of a type specifically forbidden, such as a cure for cancer, can a local authority such as this resort to legal action. However, during the year a number of advertisements that were dubious, and which contained statements that could be challenged were taken up. A typical example was an advertisement for a patent medicine which stated that "if one was always nervy and tense one must be suffering from a deficiency of Vitamin B and one should take the product". This is exaggeration. Whilst a deficiency of Vitamin B will lead to these symptoms, so will many other psychological and physiological things. The advertisement in question has now been amended.

Much good can be done by work of this kind and these misleading advertisements can often be changed. It is so that members of the public benefit by activities of this kind and more of it should be done.



**D. Prosecutions.**

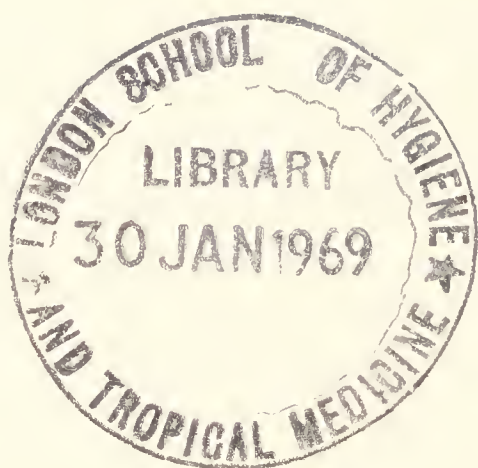
Trade :	Offence :	Act and Section :	Fine :
Baker :	Did sell a date and walnut cake not of the quality demanded in that it contained an iron nail.	Food and Drugs Act, 1955. Section 113(3)	£10 0 0  Costs : £5 5 0













12/8

